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STATE OF VERMONT
LEGISLATIVE JOINT FISCAL COMMITTEE

Monday, November 14, 2016

Minutes

Members present: Representatives Ancel, Branagan, Johnson, Lippert, and Sharpe, and Senators Ashe, Ayer, Kitchel, and Sears.

Other Attendees: Administration, Joint Fiscal Office, and Legislative Council staff, and various media, lobbyists, advocacy groups.

The Chair, Senator Kitchel, called the meeting to order at 10:06 a.m. Representative Branagan moved to approve the September 15, 2016 minutes, and Representative Ancel seconded the motion. The Committee approved the minutes.

A. Administration's Fiscal Updates: 1. Report on FY2017 Budget Adjustment Pressures; and 2. Report on FY2018 Budget Development Process and Projected Revenue and Expenditures

Trey Martin, Secretary, Agency of Administration, reviewed the process for preparing to hand off the budget to Governor-elect Phil Scott's transition team. The approach by the current Administration was of a philosophy of nonpartisanship for the good of the State of Vermont.

The current Administration recently met with the transition team and reviewed its approved office budget of $65k for FY2017. A small amount of that office budget was used to fit up temporary offices at 144 Main Street for the transition team. A book of key budget components, with potential policy and fiscal issues, was also reviewed with the transition team that included universal prekindergarten, clean water, and a sewer line extension in Bennington. Tom Cheney, the Commissioner of Human Resources, would assist the new Administration with personnel vacancies and cabinet appointments. In addition, other longer term fiscal pressures and policy decisions were included in the budget book handed to the transition team and would be discussed at ongoing meetings between the two administrations.

Andy Pallito, Commissioner, Department of Finance and Management, explained that the Department accelerated the budget process in the early fall and compiled a list of requests from the Agency and departments for the FY2017 Budget Adjustment Act (BAA), the FY2018 State Budget and Capital appropriations. The list of working copies of the budget components was handed to the transition team as a base for developing its budget. Commissioner Pallito announced that the gap in the FY2018 budget would be lower than prior years due in part to the elimination of one-time appropriations in the base. The gap amount would be dependent on the benchmark for the caseload in the Agency of Human Services (AHS). He referred to the JFO FY2018 projection of $40 – $70 million in caseload for AHS. The Department has handed off the proposed FY2017 BAA, FY2018 State Budget, the Capital and Fee Bills to the transition team.

<u>3. FY2017 Personnel, Labor, and Administrative Cost Saving</u>

Commissioner Pallito explained that in Sec. B.1106 of Act 172 of the 2016 session, there was a mandate to find $550k of General Fund savings through reductions in exempt positions. The Department had identified one-half of the positions needed to meet the target savings, and had delivered the list to the transition team. Trey Martin, Secretary, Agency of Administration, stated that to get to the anticipated $550k, the transition team had requested to scrap the original list of personnel savings, and instead use its own list to meet the savings target. He added that the budget process had been a collaborative process with the transition team, and the Department would continue to follow that spirit. Senators Ashe and Kitchel agreed it was the best approach.

The Chair explained that the FY2017 budget, Act 172, directed the Administration to identify areas of competing spending pressures, and to estimate the cost of fully funding those areas, such as teachers' retirement, pay act, and child care assistance. She asked the Commissioner if the Administration had a sense of what those spending pressures would look like for the FY2018 budget. Commissioner Pallito responded that the Department had not yet specifically determined those costs since it was early in its discussions with the transition team.

The Chair asked how public hearings for the FY2018 budget proposal would be managed. The Commissioner explained that the previous system, a webinar-based structure, had been used for the last 4 years, but had received several negative comments. The Department was proposing a new system to the transition team to post a presentation on its website of the proposed budget, and a press release would be sent out to ask for public comment through a special e-mail on its website. Public comment would be finished about mid-December.

Representative Lippert inquired who the Department was working with in the transition team. Secretary Martin responded the Chief of the Transition Team, Tim Hayward, and Neil Lunderville, and Jim Reardon were the budget liaisons. Representative Lippert asked if the budget documents delivered to the transition team were public. Secretary Martin explained the documents were under the Executive Privilege statutory clause.

<u>C. Global Commitment Waiver Update</u>

Selina Hickman, Director of Health Care Operations, Compliance and Improvement, and Sarah Clark, Chief Financial Officer, Agency of Human Services, distributed a document to the Committee. Ms. Hickman explained that the Medicaid Global Commitment Waiver began in

2005 and then was consolidated in 2015 with the States Choices for Care Waiver. The new consolidated Waiver included a 5-year extension to December 31, 2021 that allowed the Agency to have more stability in its federal funding. The All-Payer Model ends December 31, 2022. Ms. Hickman explained that the Global Commitment Waiver was important to the All-Payer Model because it aligned Medicaid, a major funding source in Vermont's health care system, as additional capacity for providing federal commitment of matching dollars. Another important component of the Waiver for Vermont was its flexibility of allowing for expenditures that were not normally Medicaid matchable, which totaled $127 million in the previous fiscal year.

Ms. Hickman reviewed the new Centers for Medicare and Medicaid Services (CMS) Medicaid-managed care rules released in the spring of 2017 that included activities around oversight, compliance, and prior approval. CMS rules were also an attempt to standardize demonstration waivers across all of the states that would create some guardrails around Vermont's Medicaid flexibility under the Waiver.

Ms. Clark explained the short-term financial impacts of the new rules for the Waiver. In FY2017, an additional $5 million in General Funds would be needed in the BAA. In the FY2018 BAA, an estimated $6.2 million in General Funds would be needed. Ms. Clark stated that the new CMS rules reduced allowable expenditures of Managed Care Organizations (MCO) investments. The capacity of funds of roughly $26 million (FY2016) would remain the same but there would be a 5-year phase down of some expenditure covered under the Waiver, such as room and board, and Institutes for Mental Disease (IMD). The fiscal impact to Vermont over the 5-year phase down was an estimated $64 million or 4% of Vermont's $1.6 billion Medicaid budget. The bulk of the reduced expenditures occurred in year 3 of the phase down or FY2019 but in FY2018 or year 2, there was a phase down of the Health Information Technology (HIT) MCO investment. Ms. Hickman added that the IMD MCO investment impacted the Vermont Psychiatric Care Hospital (VPCH) and several facilities for residential treatment for substance abuse disorders. The Agency was currently seeking an amendment to the Global Commitment Waiver for authority to pay for those facilities under an alternative federal funding grant of $10 million.

Senator Sears recalled the intent when building the VPCH was for the facility to be Medicaid eligible. He then asked if that had changed with the new rules. Ms. Hickman responded that VPCH was the only such mental health facility with the flexibility to receive funding as an MCO investment. Senator Sears inquired if the rule changed the dynamic of the eligibility for the 25-bed facility. Ms. Hickman responded that in order for the facility to be Medicaid-match eligible it would need to reduce its beds to 16 or fewer.

Senator Kitchel offered that there was a big ongoing debate on the adequacy of funding for Vermont's current mental health delivery system. She encouraged the new Administration to do a comprehensive examination of the prior assumptions for adequacy of services made during post Irene and possibly recalibrate how the State delivers mental health services to Vermonters, such as two 16-bed facilities in different parts of the State. Senator Ayer added that there was news of CMS reconsidering its decision on limiting the amount of beds under the Medicaid funding rule, and that Vermont's funding issues were not unique compared to other states. Ms. Hickman agreed that CMS was reconsidering its bed capacity rule. Senator Kitchel stated that the federal government was antiquated in its delineation of how it treated mental health benefits compared to medical benefits when there should be parity between the two. Ms. Hickman explained that CMS had specific language in the Waiver requesting and evaluation by AHS on the effectiveness of services of an IMD, which potentially could impact CMS's decision of bed capacity. She added that Vermont had a 10-year (2026) phase down plan from CMS on IMDs. Representative Ancel asked what the evaluation entailed, and Ms. Hickman stated the framework needed to be submitted by AHS before the spring of 2017 in order for CMS to develop the evaluation. Senator Kitchel suggested the standing committees of jurisdiction assist AHS with the framework. Representative Lippert asked for clarity on whether CMS would provide funding for the evaluation. Ms. Hickman responded that Vermont would fund its own evaluation of its system and provide the results to CMS but the expense of the evaluation would be Medicaid matchable at the administrative rate. Senator Ayer requested the criteria of how AHS would evaluate the effectiveness of its system when available.

Senator Sears commented on the issue of the 15-bed Woodside facility, and concerns on the physical condition and the lack of population, along with its annual $4 million budget gap. Ms. Clark explained that there were a few options for Woodside that should be evaluated. Ms. Hickman offered that Woodside was not in the IMD category since the facility housed youths. However, CMS created new regulations in 2016 around the definition of an inmate that excluded Woodside from Medicaid match.

Representative Lippert showed concern for further changes to definitions for Medicaid under the new U.S. Administration, and he inquired if AHS had some insight of future negotiations with CMS. Ms. Hickman responded that recent conversations and negotiations with CMS had seemed to interpret a more stringent determination of rules around Medicaid with the new U.S. Administration.

Ms. Clark mentioned that another financial impact to Vermont from the new Waiver was a change in the administrative costs it could claim from 45/55, which was the program rate to the administrative cost of 50/50. However, the State will now also be able to take advantage of additional opportunities for enhanced match for Medicaid Management Information Systems (MMIS), for example. In responding to Representative Sharpe's question, Ms. Clark stated that an early estimate of the fiscal impact for the rate change was $3.4 million in both FY2017 and FY2018. Representative Ancel asked what parts of the Waiver agreement could be changed unilaterally and how solid was the agreement between Vermont and CMS. Ms. Hickman explained that all demonstration waivers have standard terms for termination or changes to the agreement, which could be initiated by either the State or CMS. The State has a public engagement process requirement of 120 days for notice for amending the agreement, but CMS was not under any requirement. Ms. Hickman stated that she would review the agreement terms to ensure correct timelines and report back to the Committee.

Due to confusion from the chart on page 4 of the handout, Senator Kitchel asked whether the matching funds from the State were obligated. Ms. Hickman explained the chart was more of a menu that showed what the federal government identified as funds available to the State but it was not obligated to accept and match them.

<u>D. Tax Computer System Modernization Implementation Report</u>

Mary Peterson, Commissioner, and Gregg Mousley, Deputy Commissioner, Department of Taxes, gave an update on the implementation of the Department's tax computer system modernization and distributed a report. As background, Commissioner Peterson explained that the Department keeps a portion of the increased revenue from the modernization project to continue the implementation of an integrated system for all of the State tax functions on one platform. The project was on budget and on time. The contractor, FAST Enterprises, was paid through the demonstration of performance of enhanced revenue from the project.

Commissioner Peterson gave an overview of the tax modernization project implementation, and an update on the budget impacts. The original FAST contract was signed in January 2014 for the company's GenTax product that was utilized in over 20 U.S. states and several other countries. Project testing for new functions was performed during the summer months and then additional testing between the different tax systems was done during the fall. FAST colocated a project team within the Department's Information Technology team's office since the project's inception. In December 2014, phase I of the MY VTAX system was implemented for the conversion of e-filing of corporate and business income tax, and the debut of VTEL, the tax online portal.

In November 2015, the Department released Phase II of the system that included sales & use, meals & rooms, withholding, and most of the insurance taxes. The current Phase III implementation brought the personal income tax into the online system. Since people filing had a tendency to use professional software, this creates some challenges with coordination between the system and software vendors. The personal income tax system also included a microsimulation model, Chainbridge, that allowed for the sharing and querying of aggregate data with the Joint Fiscal Office (JFO) for forecasting. Senator Kitchel stated that the improvements to the Chainbridge model would assist lawmakers to develop good fiscal policies.

Commissioner Peterson announced that the Department would be shutting most of the older systems after December 7, 2016. The only part of the original system still in place would be replaced in the final phase or phase IV system implementation, which included miscellaneous taxes. The Commissioner praised her staff for the amount of work and ability to embrace all the change of the new system. The Department had been concentrating on the audit and collection divisions to standardize operating procedures. Senator Kitchel stated that if there were complaints on the new system from businesses, it would probably be for the length of time and clarity from the audit division on responding to requests. She asked if the Department had reviewed those functions and whether there was a plan to improve those areas. Commissioner Peterson responded that where there was confusion on policies, the Department would work through those and allow taxpayers to comply with rules going forward but would not penalize for past mistakes. Auditors had a maximum limit of four months to review a business. There were tools within the system to allow for outreach for noncompliance and reporting of unclear policies.

Commissioner Peterson explained that the Department of Labor has asked the Department of Taxes to include its Health Care Employer Assessment function into the VTAX system. FAST has agreed it could probably include the function for no addition cost in Phase IV. She added that it seemed a good time to have the discussion on changing the Department of Taxes to the Department of Revenue. There had been discussion on including the Department of Motor Vehicles' registration and driver licensing fees, and possibly other collections such as the provider tax within the Department of Vermont Health Access (DVHA). The Commissioner recommended that it would be the most efficient to add additional functions to the system while FAST was present within the Department and accomplishing the contracts maintenance. In responding to the Chair, the Commissioner stated the Department would include all the information and conversations on the system with the transition team.

The Commissioner reviewed the fiscal information on the funding of the Tax Computer System Modernization Fund that was explained at the back of the report distributed earlier. She recommended to the Committee and to the incoming Administration to fund the highest level of the FAST maintenance agreement when the contract runs out in 2024. The agreement would include the current level of service and an option to host all of the system's functions in the Cloud instead of using servers at the Department of Information and Innovation.

In responding to Representative Lippert, Commissioner Peterson clarified that enhanced revenue was any additional revenue collections above the baseline of what the Department expected, and approved by the Department of Financial Regulation. Areas of enhanced revenue included a faster turn-around time for income tax returns that stopped interest payments for tardiness; the reduction of refund fraud; and better sorting of federal data to determine fraud candidates. Senator Ashe inquired if the Department received a list of people that were due to pay a penalty from lack of health insurance prescribed by the Affordable Care Act. Commissioner Peterson responded that the Department would review its data to see if it had been received.

<u>E. Vermont Veteran's Home Report</u>

Melissa Jackson, CEO, Vermont Veterans' Home (VVH), distributed a report and presentation. The Chair asked for an update on the fiscal health of VVH and where its key variables were for costs. Ms. Jackson explained that VVH's census has increased to 121 with two additional residents expected. In the past, the VVH had denied 80% of its applicants due to a lack of finances; instead the big reason for denials was mental health issues because of the fiscal impacts for 24-hour staffing when the need arises for certain extreme situations. The VVH recently partnered with the Rutland Chamber of Commerce for marketing with radio and television ads around Rutland and Bennington where the highest concentration of veterans were in Vermont.

Ms. Jackson clarified that call-out rates were when an employee was scheduled to work but calls the employer to say he or she cannot work. The national average of call-out rates for nursing homes was 5.6% and the VVH rate was 8-9½ %. Most of the VVH call-outs were due to a qualifying Family and Medical Leave Act (FMLA) issue. Additional staff issues were due to workers' compensation absences. The national average for loss claims in nursing homes was 4.9% and the VVH rate was only 4.25%, but some staff had been out for as much as 18 months. The VVH received a response through an RFP and hired the HMR Veterans' Services to assist with the issue. Currently the VVH has gone 90 days without a work-related injury, and managing injuries in-house with a local provider that assigns injured staff to light duty work until recovered.

Senator Kitchel asked that with the higher than normal call-out rates for VVH, was there a factor/s as to why the rates were so high, and how was the facility translating the report data into an action plan to address the issue. Ms. Jackson responded that the home was allowing the staff to do their own scheduling with the expectation that there would be a reduction in the call-out rate. Senator Kitchel asked if Ms. Jackson's suggestion in testimony, during the session, for the VVH to hire additional part-time staff for more flexibility had been acted upon. Ms. Jackson responded that the facility did have two part-time nurses but was searching for more part-time staff. She cautioned that the facility had to be careful on how many hours it gave to part-time staff because more than a certain level would mean that it was mandated to provide full benefits to those employees.

Ms. Jackson clarified that block FMLA was a known amount of time that a staff would be taking leave, and intermittent FMLA was when someone call out unexpectedly for illnesses such as anxiety, migraine headaches, or asthma, of which the latter had been increasing overtime.

In responding to Senator Ayer, Ms. Jackson explained that the high call-out rate had been present for a while. The VVH attempted disciplinary action for those staff frequently calling out but the rate remained high. Senator Ayer asked if the VVH had higher than average acuity patients than the State. Ms. Jackson responded she would need to check the State's average. Senator Sears commented that when focusing on the results of programs, the VVH had exemplary Veteran care and he encouraged more Vermont Veterans to use the facility.

F. Human Resources Classification Study - State Employee Position Classification System Report

Tom Cheney, Commissioner, Department of Human Resources, gave the highlights of the State Employee Position Classification System Report. The report was an interim report with the full report due January 15, 2017. It was an evaluation of the State's reclassification system for State employees, created in 1986 and recalibrated in 1993/1994. In responding to Representative Johnson, Commissioner Cheney stated there were just over 8,000 State classified employees and 1,800 job classifications with a 4:1 ratio or four employees for every one job class. Senator Kitchel pointed out there were some large fiscal implications because of the antiquated classification system. Commissioner Cheney explained that the current system, the Point Factor Evaluation System, was very rigid. A broader system with few classifications would be more modern and with more flexibility for employees and the State.

Commissioner Cheney explained that the Department hired a contractor to study the State's classification system that confirmed the system was outdated and should be moved to a more modern system. Representative Ancel asked if the report would identify if the State should purchase a system to replace the old one, and if so, was there an off-the-shelf system available to purchase. The Commissioner responded that the report recommended a new system but there should be a process for reviewing the different types available through a Request for Information (RFI) process. The report suggested small statutory changes and the creation of a classification and compensation steering committee that included the Vermont State Employees' Association (VSEA). He confirmed that the report's recommendations were on the larger report to the new Administration's transition team. In responding to Representative Lippert, the timeline for implementation of a new methodology system could be a couple of years, due to the large amount of work involved in adapting it to the State's own collective bargaining units and contracts.

G. Non-Emergency Medical Transportation (NEMT) Contract

Aaron French, Deputy Commissioner for Health Services and Managed Care, Department of Vermont Health Access (DVHA), distributed a memorandum to the Committee and explained that the Legislature had requested DVHA provide information to JFC for review and approval of any proposed contracts and their impacts on the Non-Emergency Medical Transportation (NEMT) System. DVHA received three bids from its Request for Proposal (RFP).

One of which was from the current NEMT vendor, Vermont Public Transportation Association (VPTA) and the other two were from out-of-state businesses. DVHA planned to award VPTA the contract because VPTA was already familiar with the NEMT system and had infrastructure in place. The current contract, with VPTA, would expire at the end of 2016 but VPTA informed DVHA it would need additional time [March or April] to get all the elements up and running that were written in the new contract. DVHA decided to extend the contract until the spring when it would negotiate its payment methodology in the new contract with VPTA.

Senator Kitchel added that the Medicaid portion of the NEMT contract for the blind, disabled, and elderly was about $13 million. Senator Ayer asked if the VPTA's request for an extension to negotiate a contract was due to its inability to meet the criteria for information technology. She also inquired if DVHA was evaluating VPTA's current policy of packaging riders, which greatly increased the time on the bus as many riders are delivered to different appointments and sites. Senator Kitchel explained that the issue was something the State was struggling with to allow for better service and accountability, but meetings were ongoing with the Agency of Transportation (AOT). She added that AOT was responsible for the RFP and the contract negotiations but DVHA's focus was on whether the quality of standards was met. Mr. French stated that DVHA and AOT had built quality metrics around the new contract that would be reviewed monthly. VPTA had purchased a new computer platform but not all the vehicles had the software installed that would allow for the review of quality by DVHA.

Senator Ayer moved to approve DVHA's recommendation of granting VPTA the contract for NEMT, and Representative Ancel seconded the motion. The Committee approved the motion.

<u>H. JFO #2857 – $3,625,000 grant from the U.S. Department of Food and Administration to the Vermont Agency of Agriculture, Food & Markets.</u>

Abbey Willard, Food Systems Section Chief, and Marcey Hodgdon, VAAFM's Financial Director, Agency of Agriculture, Food and Markets, gave an overview of the grant. Ms. Willard explained that Vermont was one of 42 states to receive the grant that includes eight positions and $3.625 million over the next five years. The grant would allow the Agency to prepare for the implementation of the new Federal Drug Administration's (FDA) rule for produce safety.

In response to Senator Kitchel's question, Ms. Willard clarified that each State was supposed to develop its own framework for compliance under the new federal produce safety rule that would enable their inspectors to perform technical and educational outreach along with enforcement of federal rules. Representative Ancel inquired what would happen if the federal government ended the funding or program to states. Ms. Willard responded that it was not unusual for states to have cooperative agreements for more than a year with the federal government on funding programs, but the Agency was exploring options during its first year as a possible fee-for-service program in the future. The Chair asked for clarity on the funding for the positions in the future. Ms. Willard explained that the federal government would fully fund the implementation and functions of the program for the next five years. In response to Representative Ancel's question, Ms. Willard explained that funding was dependent on Congress's passing an annual budget. Representative Johnson asked that since the limited service positions were reimbursed under the grant, was there an opt-out clause for the requirements of the grant if Congress were not to pass a budget. Ms. Willard agreed with Representative Ancel that the federal government had committed to funding the program for five years but Congress would still need to pass a budget each year to make the funding available. Senator Kitchel inquired if funding were not available to the program, could the State then use its Reduction in Force (RIF) ability for the positions since they are limited service. Ms. Willard agreed the positions would be subject to the State's RIF authority.

Representative Lippert added that there were 42 other states following the same model and probably had the same concerns and budget questions. He asked if the Committee could document its intent to not backfill funding of the program or positions if Congress did not pass a budget. The Chair stated the motion should reflect that the Committee's concern of future funding issues include that "the acceptance of grant does not constitute a commitment on behalf of the State of Vermont to replace funding if there were a failure by the federal government to fund the grant."

In response to Representative Branagan's comments on issues with fees within the agricultural industry, Ms. Willard stated that there was a conversation of whether the food industry should be responsible for a portion of its inspection costs in the future as a fee-for-service system, if they exceed federal funding. The Agency planned to create a voluntary registry of the industry within Vermont. There were also some farms that did not fall under the FDA rule, and their inspections were not funded by federal funds, but they preferred to be certified by the State program to gain marketing access. It is possible an Agency plan could include charging those types of businesses a fee in order for them to receive a certificate of standard.

Senator Sears moved to accept the grant, but recognizing the concern of the Committee that acceptance of the grant in no way constituted an obligation of the State for future funding of the program or for the request to collect fees, and Representative Lippert seconded it. The Committee approved the motion.

<u>I. Fiscal Office Updates - 1. Fiscal Officers' Report</u>

Stephen Klein, Chief Fiscal Officer, Joint Fiscal Office, gave the highlights of his report to the Committee. He explained that the Picus report submitted last fall did not include one component, which was a spreadsheet to compare town mergers and other data. Picus had been creating the data sheet but it had not produced the results anticipated. Due to this one deliverable of the seven in the contract not being met, Picus agreed to forgo $48k of the contracted payment amount. In response to Senator Ayer's question, Mr. Klein explained that when Picus bid on the contract, the component was very attractive because it would have given some guidance to policymakers. Picus was the only bidder to include the component due to the complexity involved in evaluating Vermont's data. Representative Ancel requested JFO to start evaluating the risks of possible federal funding reductions, and to start identifying categories that could be in jeopardy. Mr. Klein agreed the Office would begin evaluating the risks and creating categories of areas of possible impacts from federal funding cuts.

2. Update on JFC VEGI Request

Sara Teachout, Senior Fiscal Analyst, Joint Fiscal Office, and Mr. Klein referred to a memorandum from JFO to the Committee, dated October 28, 2016 on the review of an awarded Vermont Economic Growth Incentive (VEGI) to Mylan Technologies, and information of the company's intention to reduce staffing in 2016. Mr. Klein explained that the memo explained all the public information available but if the Committee were to request more in-depth information, it could make a motion to continue meeting in Executive Session. He suggested that the standing committees of jurisdiction gather additional testimony during the legislative session on the level of the confidentiality for businesses under the VEGI statute.

Senator Kitchel commented that the issue raised concern on the protection in the statute to businesses, and in this circumstance a major corporation, that was receiving public funding. Policymakers have the obligation to ensure it had the mechanisms to fulfill its duty to constituents. The Committee had a discussion of whether it should convene an Executive Session to hear more information on the confidentiality provisions. The Chair commented that due to the severity of the issue, it seemed important for the Committee to convene an Executive Session.

Senator Ayer moved to declare an Executive Session for the purpose of discussing confidential financial and personal information. The Committee approved the motion and convened an Executive Session at 12:38 p.m.

The Committee adjourned Executive Session with no action needed to be taken. Representative Sharpe moved to adjourn the Joint Fiscal Committee meeting, and the Committee adjourned at 12:46 p.m.

Respectfully Submitted,

Theresa Utton-Jerman
Legislative Joint Fiscal Office